Complete and send this form, together	er with applicable f	fee(s), to: <u>M</u> or <u>F</u>	Commissioner P.O. Box 1450 Alexandria, Vii	E FEE for Patents ginia 22313-1450	
NSTRUCTION: This form stoud be used for propriate. All farting appropriate. All farting appropriate and including dicated unless corrected below or directed oth aintenance fee notifications.		JE FEE and P rders and notif a) specifying a	PUBLICATION FEE (if rec fication of maintenance fees new correspondence addres	uired). Blocks I through 5 s will be mailed to the currents; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Bld 27752 7590 08/27/	2004		Note: A certificate of Fee(s) Transmittal. I papers. Each addition have its own certification.	of mailing can only be used for this certificate cannot be used and paper, such as an assignmente of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must
THE PROCTER & GAMBLE CO INTELLECTUAL PROPERTY DIV WINTON HILL TECHNICAL CEN 6110 CENTER HILL AVENUE	/ISION		I hereby certify that States Postal Service addressed to the M transmitted to the US	ertificate of Mailing or Tran this Fee(s) Transmittal is beir with sufficient postage for fi ail Stop ISSUE FEE address PTO (703) 746-4000, on the	smission g deposited with the United stst class mail in an envelope s above, or being facsimile date indicated below.
CINCINNATI, OH 45224	004 4777			D.RRichards	(Depositor's name)
/2004 WARDELKS 00000074 130206 10	0014377		Patrily O.	Pilrady	(Signature)
::1501 1370.00 DA ::1504 300.00 DA			October	22, 2004	(Date)
:8001 ICATION NO. 9.00 DA FILING DATE		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/014,377 12/11/2001		Raul Victori	ino Nunes	8624	1041
APPLN:TYPE SMALL ENTITY			PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO	\$1330	0	\$300	\$1630	11/29/2004
					
EXAMINER	ART UN	TIV	CLASS-SUBCLASS		
EXAMINER PRATT, HELEN F	1761		CLASS-SUBCLASS 426-575000		
PRATT, HELEN F Change of correspondence address or indication	1761 n of "Fee Address" (37 nge of Correspondence	2. For print (1) the nam or agents O (2) the nam registered a 2 registered		ent attorneys a member a mes of up to	OTT WILL & EMER
PRATT, HELEN F Change of correspondence address or indication R 1.363). Change of correspondence address (or Chan Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached Number is required.	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer	2. For print (1) the nam or agents O (2) the nam registered a 2 registered listed, no na	ing on the patent front page, nes of up to 3 registered pate. R, alternatively, ne of a single firm (having as attorney or agent) and the nat patent attorneys or agents. I ame will be printed.	ent attorneys a member a mes of up to	OTT WILL & EMER
PRATT, HELEN F Change of correspondence address or indication FR 1.363). Change of correspondence address (or Chanaddress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attachen Number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identificed recordation as set forth in 37 CFR 3.11. Comp	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer	2. For print (1) the nam or agents O (2) the nam registered a 2 registered listed, no na	426-575000 ing on the patent front page, nes of up to 3 registered pater, alternatively, ne of a single firm (having astrorney or agent) and the national patent attorneys or agents. I ame will be printed. (print or type)	a member a mes of up to f no name is 3	OTT WILL & EMER
PRATT, HELEN F Change of correspondence address or indication FR 1.363). Change of correspondence address (or Chanaddress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identification as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON 7 ified below, no assignee oletion of this form is NO	2. For print (1) the nam or agents O (2) the nam registered a 2 registered ilsted, no na THE PATENT data will appe T a substitute fi	426-575000 ing on the patent front page, nes of up to 3 registered patents, alternatively, ne of a single firm (having as attorney or agent) and the na dipatent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assignor filing an assignment.	a member a mes of up to f no name is 3	
PRATT, HELEN F Change of correspondence address or indication FR 1.363). Change of correspondence address (or Chanaddress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identification as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON 7 ified below, no assignee oletion of this form is NO	2. For print (1) the nam or agents O (2) the nam registered a 2 registered listed, no na THE PATENT data will appe T a substitute for	426-575000 ing on the patent front page, nes of up to 3 registered patents, alternatively, ne of a single firm (having as attorney or agent) and the na dipatent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assignor filing an assignment.	a member a mes of up to f no name is 3	
PRATT, HELEN F Change of correspondence address or indication FR 1.363). Change of correspondence address (or Chanaddress form PTO/SB/122) attached. Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identification as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE E PROCTOR & GAMBLE COMPANEASE Check the appropriate assignee category or	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer 'A TO BE PRINTED ON 7 ified below, no assignee election of this form is NO (E	2. For print (1) the nam or agents O (2) the nam registered a 2 registered for a constant THE PATENT data will appe T a substitute for a substitute for a constant The cincinn	426-575000 ing on the patent front page, nes of up to 3 registered patent, alternatively, ne of a single firm (having as attorney or agent) and the na dipatent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assignor filing an assignment. E: (CITY and STATE OR COATI, OH	a member a mes of up to f no name is 3	document has been filed for
PRATT, HELEN F Change of correspondence address or indication FR 1.363). Change of correspondence address (or Chanaddress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identification as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE E PROCTOR & GAMBLE COMPANEASE Check the appropriate assignee category or The following fee(s) are enclosed:	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer 'A TO BE PRINTED ON 7 ified below, no assignee election of this form is NO (E	2. For print (1) the nam or agents O (2) the nam registered a 2 registered a 12 registered a 2 registered a 3 registered a 3 registered a 6 listed, no na THE PATENT data will appe T a substitute f 3 RESIDENCE Cincinn cinted on the pa 5. Payment of F	426-575000 ing on the patent front page, nes of up to 3 registered patents, alternatively, ne of a single firm (having as attorney or agent) and the na dipatent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assignor filing an assignment. E: (CITY and STATE OR COLORS) atti, OH	ent attorneys a member a mes of up to fino name is 3 gnee is identified below, the country) Corporation or other private gr	document has been filed for
PRATT, HELEN F Change of correspondence address or indication R 1.363). Change of correspondence address (or Chanddress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached Number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identi recordation as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE PROCTOR & GAMBLE COMPANE C	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON 7 ified below, no assignee election of this form is NO (E	2. For print (1) the nam or agents O (2) the nam registered a 2 registered listed, no na THE PATENT data will appe T a substitute f 3) RESIDENCE Cincinn rinted on the pa D. Payment of F	426-575000 ing on the patent front page, nes of up to 3 registered patents, alternatively, ne of a single firm (having astitorney or agent) and the national patent attorneys or agents. I ame will be printed. (print or type) for filing an assignment. E: (CITY and STATE OR COLORS) atti, OH Stept): Individual Colors Tee(s): In the amount of the fee(s) is earth.	ent attorneys a member a mes of up to fino name is 3 gnee is identified below, the conductor of the private grant of the private gran	document has been filed for
PRATT, HELEN F Change of correspondence address or indication R 1.363). Change of correspondence address (or Chandedness form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached Number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identification as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE PROCTOR & GAMBLE COMPAN asse check the appropriate assignee category or The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount p	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON 7 ified below, no assignee election of this form is NO (E	2. For print (1) the nam or agents O (2) the nam registered a 2 registered listed, no na THE PATENT data will appe T a substitute f 3) RESIDENCE Cincinn cinted on the pa D. Payment of F A check ir	426-575000 ing on the patent front page, nes of up to 3 registered patent, alternatively, ne of a single firm (having as attorney or agent) and the nationare or agents. I ame will be printed. (print or type) ar on the patent. If an assign of filing an assignment. E: (CITY and STATE OR Coati, OH atent): Individual Coes, and the amount of the fee(s) is a copy credit card. Form PTO-20.	ent attorneys a member a mes of up to fino name is 3 gnee is identified below, the continuous properties of the continuous propert	document has been filed for oup entity
PRATT, HELEN F Change of correspondence address or indication R 1.363). Change of correspondence address (or Chandedress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached Number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identification as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE PROCTOR & GAMBLE COMPAN CASE CHECK the appropriate assignee category or The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount p Advance Order - # of Copies 3	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON To ified below, no assignee eletion of this form is NO (E) IY categories (will not be properties)	2. For print (1) the nam or agents O (2) the nam registered a 2 registered listed, no na THE PATENT data will appe T a substitute f 3) RESIDENCE Cincinn cinted on the pa D. Payment of F A check ir	426-575000 ing on the patent front page, nes of up to 3 registered patent, alternatively, ne of a single firm (having as attorney or agent) and the nationare or agents. I ame will be printed. (print or type) ar on the patent. If an assign of filing an assignment. E: (CITY and STATE OR Coati, OH atent): Individual Coes, and the amount of the fee(s) is a copy credit card. Form PTO-20.	ent attorneys a member a mes of up to fino name is 3 gnee is identified below, the conductor of the private grant of the private gran	document has been filed for oup entity
PRATT, HELEN F Change of correspondence address or indication R 1.363). Change of correspondence address (or Chandedress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached Number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identirecordation as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE PROCTOR & GAMBLE COMPANERS Check the appropriate assignee category or the following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount p Advance Order - # of Copies 3 Change in Entity Status (from status indicated)	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON To ified below, no assignee eletion of this form is NO (E) IY categories (will not be properties) defined below, and assignee eletion of this form is NO (E) IA bove)	2. For print (1) the nam or agents O (2) the nam registered a 2 registered listed, no na THE PATENT data will appe T a substitute f 3) RESIDENCE Cincinn rinted on the pa D. Payment of F A check ir Payment b The Direct Deposit Acco	ing on the patent front page, nes of up to 3 registered patent R, alternatively, ne of a single firm (having astitorney or agent) and the national patent attorneys or agents. I ame will be printed. (print or type) are on the patent. If an assignment. E: (CITY and STATE OR Coati, OH attent): Individual Security of the amount of the fee(s) is easy credit card. Form PTO-20 etor is hereby authorized by unt Number 13—0206	ent attorneys a member a mes of up to fino name is 3 gnee is identified below, the continuous properties of the continuous propert	oup entity Government credit any overpayment, to opy of this form).
PRATT, HELEN F Change of correspondence address or indication R 1.363). Change of correspondence address (or Chanaddress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identification as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE PROCTOR & GAMBLE COMPANERS CHECK TO THE PROCTOR ASSIGNEE COMPANERS CHECK TO THE PROCTOR ASSIGNEE PROCTOR ASSIGNEE COMPANERS CHECK TO THE PROCTOR ASSIGNEE CARBOLIC COMPANERS CHECK TO THE PROCTOR ASSIGNEE CARBOLIC COMPANERS CHECK TO THE PROCTOR ASSIGNEE CARBOLIC COMPANERS CHECK TO THE PROCTOR ASSIGNED CARBOLIC COMPANERS CHECK TO THE PROCTOR ASSIGNED CARBOLIC CA	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON To fifed below, no assignee eletion of this form is NO (E IY categories (will not be presented) dermitted) description of the service	2. For print (1) the nam or agents O (2) the nam registered 2 registered listed, no na THE PATENT data will appe T a substitute f B) RESIDENCE Cincinn The data will appe T a substitute f Cincinn The Direct paper of F A check in Payment b The Direct peposit Acco	426-575000 ing on the patent front page, nes of up to 3 registered patents, alternatively, ne of a single firm (having astitorney or agent) and the national patent attorneys or agents. If an assignment of filing an assignment. E: (CITY and STATE OR Coati, OH atent): Individual Coes, ati, OH in the amount of the fee(s) is easy credit card. Form PTO-20 ctor is hereby authorized by ant is no longer claiming SM.	ent attorneys a member a 2	oup entity Government credit any overpayment, to opy of this form).
PRATT, HELEN F Change of correspondence address or indication FR 1.363). Change of correspondence address (or Chan Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attached Number is required. ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is identifected as set forth in 37 CFR 3.11. Comp (A) NAME OF ASSIGNEE E PROCTOR & GAMBLE COMPAN ease check the appropriate assignee category or a set following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount publicati	1761 n of "Fee Address" (37 nge of Correspondence ' Indication form ed. Use of a Customer A TO BE PRINTED ON To iffied below, no assignee eletion of this form is NO (E IY categories (will not be properties) description of the service of the se	2. For print (1) the nam or agents O (2) the nam registered 2 registered listed, no na THE PATENT data will appe T a substitute f B) RESIDENCE Cincinn The data will appe T a substitute f Cincinn The Direct paper of F A check in Payment b The Direct peposit Acco	ing on the patent front page, nes of up to 3 registered pate IR, alternatively, ne of a single firm (having as attorney or agent) and the nate of a patent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assignment. E: (CITY and STATE OR CO atti, OH attent): Individual State of the amount of the fee(s) is easy credit card. Form PTO-200 ctor is hereby authorized by ant is no longer claiming SMA of the applicant; a result of the patent; a result is no longer claiming SMA of the applicant; a result is no longer claiming SMA of the reapply any previous other than the applicant; a result is no longer claiming SMA of the reapply any previous other than the applicant; a result is no longer claiming SMA of the reapply any previous other than the applicant; a result is no longer claiming SMA of the reapply any previous other than the applicant; a result is no longer claiming SMA.	ent attorneys a member a 2	oup entity Government credit any overpayment, to opy of this form).

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (10-04)

Approved for use through 07/31/2006. OMB 0651-0039
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB control number.

TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,679

spond to a concesion of information driess it displays a valid Civib control fightibel.					
Complete if Known					
Application Number	10/014,377				
Filing Date	December 11, 2001				
First Named Inventor	Raul Victorino Nunes				
Examiner Name	Helen F. Pratt				
Art Unit	1761				
Attorney Docket No.	71883-044002				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:			Small _			
Deposit Account 13-0206	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account McDermott Will & Emery LLP	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION		430	2252	215	Extension for reply within second month	
1. BASIC FILING FEE Large Entity Small Entity	1253	980	2253	490	Extension for reply within third month	
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,530	2254	765	Extension for reply within fourth month	
1001 790 2001 395 Utility filing fee	1255	2,080	2255	1,040	Extension for reply within fifth month	
1002 350 2002 175 Design filing fee	1401	340	2401	170	Notice of Appeal	
1003 550 2003 275 Plant filing fee	1402	340	2402	170	Filing a brief in support of an appeal	
1004 790 2004 395 Reissue filing fee	1403	300	2403	150	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 0		110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to revive - unintentional	
Fee from	1501		2501		Utility issue fee (or reissue)	1370
Total Claims	1502	490	2502		Design issue fee	
Independent -3** = X =0	1503	660	2503	330	Plant issue fee	
Claims -3" =	1460	130	1460	130	Petitions to the Commissioner	
		50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	8021	I 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 88 2201 44 Independent claims in excess of 3	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 300 2203 150 Multiple dependent claim, if not paid	1810	790	2810	395	For each additional invention to be	
1204 88 2204 44 ** Reissue independent claims	455				examined (37 CFR 1.129(b))	
over original patent	1801	790	2801		Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 0		Other fee (specify) 3 copies of patent and Publication Fee 309				309
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic F	Filing F	ee Paid SUBTOTAL (3) (\$)	1,679

SUBMITTED BY		-	(Complete	(if applicable))	
Name (Print/Type)	Patrick D. Richards	Registration No. (Attomey/Agent) 48,905	Telephone	312.372.2000	
Signature	Potrick D. Richards		Date	October 22, 2004	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.